

Maine Department of Agriculture
Arborist License Renewal Notice



Your Arborist License with the Maine Department of Agriculture will expire on **December 31, 2005** and should be renewed before this date to avoid paying a late fee and also so you can legally continue to work as an arborist in Maine. Licenses may be renewed up to 90 days after the date of expiration by paying a late fee of \$10.00 in addition to the renewal fee. If you apply for renewal more than 90 days after the expiration date, you may be subject to the requirements of new applicants.

Important - Please Remember:

- Follow the directions and review the fee schedule on the back when completing the form below.
- **You must answer “yes” or “no” to the question related to criminal convictions** under the authority of 5 MRSA, Chapter 341, Sections 5301-5303. If you answer “yes” you will not automatically be unable to renew your license.
- **By signing this form you attest to having proper insurance coverage to engage in arboriculture work.** We will need proof of insurance in the form of a current **certificate of insurance**. Please have your insurance company send us a copy. If we do not receive a copy of an up-to-date certificate of insurance we will assume you are not currently working as an arborist, but simply maintaining your license. You will not be included on the Department’s annual listing of licensed and insured arborists.
- Detach and mail the completed application with the appropriate fee (check or money order made payable to “Treasurer, State of Maine”) to:

Division of Plant Industry
Maine Department of Agriculture
28 State House Station
Augusta ME 04333

Thank you for your prompt attention in renewing your license.

Please keep this
for your records

Ann Gibbs
State Horticulturist

Date sent to Department of Agriculture _____

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***Renewal Application***

**Have you been convicted of a crime (other than minor traffic violations) since your last license renewal?** [ ] NO [ ] YES  
If “yes” please list date(s) and crime(s) on a separate piece of paper and submit a copy of the court judgment(s).

**By signing this form I state that I will not engage in arboriculture work without proper insurance coverage, as stated by the Department of Agriculture, Food and Rural Resources regulations.**

SIGNATURE REQUIRED FOR RENEWAL \_\_\_\_\_

DATE \_\_\_\_\_



|                     |       |
|---------------------|-------|
| FOR OFFICE USE ONLY |       |
| Ck #                | _____ |
| Amt                 | _____ |
| Date                | _____ |

SEE OTHER SIDE FOR INSTRUCTIONS

RETURN WITH PAYMENT

## INSTRUCTIONS

1. Enter any changes to name, address and telephone number to the right of the current information on the Renewal Application (bottom of reverse side of this form).
2. Answer the criminal conviction question on the Renewal Application and provide documents if requested.
3. Sign your name and date the Renewal Application.
4. Make out a check for the appropriate license fee (see below), payable to: TREASURER, STATE OF MAINE.
5. Return the RENEWAL APPLICATION with your check to:  
  
Division of Plant Industry  
Maine Department of Agriculture  
28 State House Station  
Augusta, ME 04333-0028
6. Keep the License Renewal Notice (top of reverse side) for your records.
7. If you have any questions, please call the Arborist Program at (207) 287-3891.

### ***ARBORIST LICENSE RENEWAL FEES***

#### First Class:

|                              |         |
|------------------------------|---------|
| Landscape <u>OR</u> Utility  | \$30.00 |
| Landscape <u>AND</u> Utility | \$45.00 |

#### Master:

|                              |         |
|------------------------------|---------|
| Landscape <u>OR</u> Utility  | \$30.00 |
| Landscape <u>AND</u> Utility | \$45.00 |

#### Apprentice:

|         |         |
|---------|---------|
| Renewal | \$30.00 |
|---------|---------|

|                                       |                |
|---------------------------------------|----------------|
| <b>All Late Fees (after 12/31/05)</b> | <b>\$10.00</b> |
|---------------------------------------|----------------|